PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

6-5189621138-

CLAIMS AS FILED - PART I (Column 1)						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20				R/	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* 6		X	§ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =		* 2		X	42=		OR	X84=	168-00
MULTIPLE DEPENDENT CLAIM PRESENT							+1	40=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	TC	TAL	. ,	OR-	TOTAL	918.0	
CLAIMS AS AMENDED - PART II										•	OTHER	
(Column 1)				(Column 2)		(Column 3)	olumn 3) SMALL		ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	FOLANA	=	X	42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JUNPLE DEF	ENDEN	I CLAIIVI		+1	40=		OR	+280=	
			-					TOTAL		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							T. FEE		•	ADDIT, FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total =	*	Minus	**		=	X	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	12=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDEN				r CLAIM			40=			+280=	
·	•	**						TOTAL		OR	TOTAL	
0								T. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)				,	<u> </u>	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	S 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=	X.	12=			X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDE				T CLAIM		H			OR		
	(6 the entries == !	ma 1 ia lasa ita - ii	ho optivis sal	ma 0	n 400 to co	luma 2	<u> </u>	40=		OR	+280≃	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		imber Previously P nber Previously Pa							propriate bo			